



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E292128**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	13-03121
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

TRIAL RESERVATION				
M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	12 - 11 - 2013	1526	31	0864
ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>		

SR 9 NE	BLOCK NO.	
	MILE POST	

DISTANCE	1000	MILES <input type="checkbox"/>	N <input checked="" type="checkbox"/>	E <input type="checkbox"/>	OF (REFERENCE OR CROSS STREET)
		FEET <input checked="" type="checkbox"/>	S <input type="checkbox"/>	W <input type="checkbox"/>	SOPER HILL RD

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4259533512
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LAST NAME	SCHOLLER	FIRST NAME	ANJANETTE	MIDDLE INITIAL	M
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STREET NEW ADDRESS	504 S GRANITE AVE
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CITY	GRANITE FALLS	ST	WA	ZIP	982520000
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	SCHOLAM098J3	STATE	WA	SEX	F	D.O.B. MMDDYY	04 - 23 - 1991
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	3	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	904ZRI	STATE	WA	VIN#	1HGCG3170YA028457
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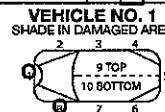
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2000	MAKE	HOND	MODEL	ACDCP	STYLE	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. MARTIN SCHOLLER PO BOX 1102 GRANITE FALLS WA 98252

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	PROGRESSIVE 71246231
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
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LAST NAME	STRAUGHEN	FIRST NAME	MICHAEL	MIDDLE INITIAL	J
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STREET NEW ADDRESS	3216 77TH DR NE
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CITY	MARYSVILLE	ST	WA	ZIP	982706806
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CDL	RESTRICTIONS	ENDORSEMENTS	L
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DRIVER'S LICENSE #	STRAUMJ417PZ	STATE	WA	SEX	M	D.O.B. MMDDYY	10 - 09 - 1959
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	B67576Y	STATE	WA	VIN#	3D7UT2HL8AG136057
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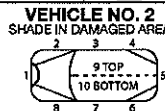
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2010	MAKE	DODG	MODEL	RAMCHA	STYLE	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. MICHAEL STRAUGHEN 7814 FIR TREE LN LAKE STEVENS WA 98258 D: 3166413745

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	STATE FARM 293 0428-A30-161
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VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	STEVE WARBIS	BADGE OR ID #	112	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E292128**

CASE # **13-03121**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #										SEX		D.O.B. MMDDYYYY							
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES		
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #										SEX		D.O.B. MMDDYYYY							
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES		
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #										SEX		D.O.B. MMDDYYYY							
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES		

NARRATIVE

Unit 2 was slowing for traffic when struck from behind by Unit 1.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

STEVE WARBIS

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

12-12-13 11:36 AM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

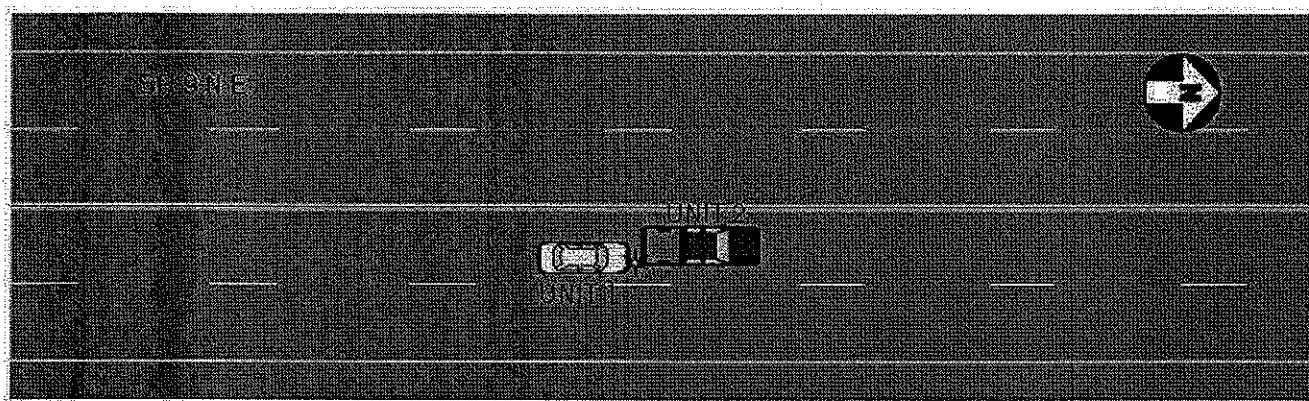
12/12/2013 7:37:41 PM

BADGE OR ID #	112	ORI #	WA0311900	TIME POLICE DISPATCHED	3:28 PM	TIME POLICE ARRIVED	3:32 PM
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REPORT NO. E292128

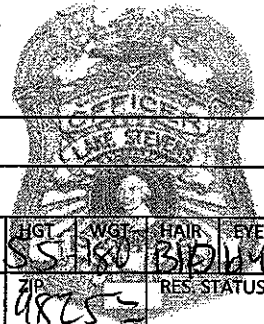
CASE # 13-03121

DATE AND TIME
OF COLLISION 12/11/13 15:26



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 13-03121

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Scholler Anjanette michelle	RACE W	ETH	SEX F	DOB 4/3/91	AGE 22	HGT 5'5"	WGT 180	HAIR BLK	EYES BLU
STREET ADDRESS 504 S granite ave		CITY granite Falls		STATE WA		ZIP 98255		RES STATUS		
HOME PHONE		CELL PHONE 425-953-3512		PLACE OF EMPLOYMENT						
WORK PHONE		EMAIL ADDRESS								

I, Anjanette Scholler, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was heading north on Hwy 9 coming up on Hwy 92. When I was in the right lane when a blue car pulled out from the left lane right in front of me and I tried to hit my brakes and the car slid to the left and I hit the vehicle in the lane next to me on the left side of my vehicle. So then I pulled to the side of the road and we called the police.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT.

SIGNATURE: 	DATE SIGNED 12-11-13	LOCATION SIGNED LK STEVENS
OFFICER/NUMBER: J. WANABUS 112	DATE SIGNED 12-11-13	LOCATION SIGNED LAKE STEVENS P.D.

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 1303121



VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) STRAUGHEN Michael J	RACE W	ETH	SEX M	DOB 10-9-59	AGE 53	HGT 6'2"	WGT 180	HAIR BLK	EYES BLU
STREET ADDRESS 7814 Fir Tree Lane		CITY LAKE STEVENS			STATE WA	ZIP 98255	RES. STATUS			
HOME PHONE 360-641-3745		CELL PHONE			PLACE OF EMPLOYMENT					
WORK PHONE 206-455-5683		EMAIL ADDRESS MICHAEL.STRAUGHEN@AERO-BOMBARDIER.COM								

I, MICHAEL STRAUGHEN, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEM(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I WAS waiting on the Light At Hwy 92 To turn GREEN when I was Hit in the Rear of my TRUCK by A white Honda sedan I was on Hwy 9 going North in the Left Lane

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE 	DATE SIGNED 12-11-13	LOCATION SIGNED Hwy 9 going North
OFFICER/NUMBER: S. WABIS 112	DATE SIGNED 12-11-13	LOCATION SIGNED LAKE STEVENS PD.

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

Incident History for: #SS13027082 Xref: #SS13027083

Case Numbers: \$SS13003121

Received 12/11/13 15:26:01 BY SPCT03 SP0377
Entered 12/11/13 15:28:17 BY SPCT03 SP0377
Dispatched 12/11/13 15:28:43 BY SPDP17 SP0194
Enroute 12/11/13 15:28:43
Onscene 12/11/13 15:32:10
Closed 12/11/13 16:04:46

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H
Police BLK: SS001 Fire BLK: AG1718 Map Page: 377E-4 Group: SS1 Beat: NORT

Src: 9

Loc: SR 9 NE/SR 92 ,LKS (V)

Latitude: (+) 48.023955 Longitude: (-) 122.109432

Loc Info: SO INTERSECTION

Name: WRIGHT, TYLER-WITN

Addr:

Phone: 4253597612

/1528 (SP0377) ENTRY ,AC, NON INJ, PARTIALLY BLOCKING ACC, NEWER MAR
DODGE RAM V WHI HONDA ACCORD , COMPLAINTS OF HURT
WRIST BUT AID DECLINED
/1528 (SP0194) DISPER SS1910 #SS13 BROOKS, SGT (RON)
/1529 ASSTER SS1937 [SR 9 NE/SR 92 ,LKS]
#SS112 WARBIS, OFFICER (STEVE)
/1529 \$CROSS #SS13027083
/1529 DUP #SS13027083
/1529 DUP NAM: STRAUGHEN MICHAEL
PHO: 3166413745
/1532 (SS112) *ONSCNE SS1937
/1535 (SP0194) ASNCAS SS1937 \$SS13003121
/1539 ONSCNE SS1910
/1542 MISC SS1910 ,TOP NOTCH ENROUTE
/1551 MISC SS1910 ,GRANITE FALLS TOWING ENROUTE
/1553 MISC SS1937 ,TOW IS ON SCENE
/1558 \$PREMPT SS1910
/1604 (SS112) *CLEAR SS1937 D/H
/1604 CLOSE SS1937